

**CERTIFICATION OF WORK**  
(To be completed by the Contractor and saved in the Contractor's CMMS)

FACID/Building: VA002 Date of Visit: 7/12/22

**Alexandria**  
Contractor Personnel on Site:

1. Patrick Donovan 2. \_\_\_\_\_

**Work Performed:**

**Preventive Maintenance** - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

1. \_\_\_\_\_

**Service Calls** – Service Call Number and Description

1. CSS# 1652 WO 18470
2. CSS# Removed access panel to unit. Found condensate drain pan full of water. Removed debris and blew line out. Cleaned up water on floor and put unit back in service.
3. CSS#

---

**CERTIFICATION OF WORK**



To be signed by the Contractor:

Print Name Patrick Donovan Date: 7/12/22

Signed: 

To be signed by Facility Manager:

By signing the Certification of Work, the said government representative signature does not constitute acceptance of any work performed by the contractor, it only acknowledges that the contractor was on-site during the identified timeline:

Print Name/Rank: SFC Caleb Mathis Date: 7/12/22

Signed: 

E-Mail: \_\_\_\_\_